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CONFIRMATION NO. 8349

Bib Data Sheet

|  |   |                               |   |   |                                |
|--|---|-------------------------------|---|---|--------------------------------|
| <b>SERIAL NUMBER</b><br>10/661,918   | <b>FILING OR 371(c) DATE</b><br>09/12/2003<br><b>RULE</b>   | <b>CLASS</b><br>033           | <b>GROUP ART UNIT</b><br>2859   | <b>ATTORNEY DOCKET NO.</b><br>13435.6USU1 |                                |
| <b>APPLICANTS</b><br>Christopher A. Rager, Bozeman, MT;  |   |                               |   |   |                                |
| <b>** CONTINUING DATA *****</b><br>This appln claims benefit of 60/410,877 09/13/2002  |   |                               |   |   |                                |
| <b>** FOREIGN APPLICATIONS *****</b>   |   |                               |   |   |                                |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b><br>** 01/03/2004  |   |                               |   |   |                                |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance met |   | <b>STATE OR COUNTRY</b><br>MT | <b>SHEETS DRAWING</b><br>2  | <b>TOTAL CLAIMS</b><br>19                 | <b>INDEPENDENT CLAIMS</b><br>4 |
| Verified and Acknowledged<br>Examiner's Signature _____ Initials _____   |   |                               |   |   |                                |
| <b>ADDRESS</b><br>23552  |   |                               |   |   |                                |
| <b>TITLE</b><br>COMPENSATOR BOW SIGHT  |   |                               |   |   |                                |
| <b>FILING FEE RECEIVED</b><br>933  | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: |                               | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |   |                                |